

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>7/9/04</u>		2 Serial/Patent # <u>08/913,139</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time	38	1/16/04	\$1002.00
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input checked="" type="checkbox"/>	Petition	37	1/16/04	\$ 665.00
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ 1667.00
10 REASON:		8 TO BE REFUNDED BY:		
<input type="checkbox"/>	Overpayment	Treasury Check		
<input type="checkbox"/>	Duplicate Payment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:	
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	9	50	--2319
<u>Application not open/abandoned. No pending response requiring extension of time.</u>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Nancy Johnson</u>		TITLE: <u>Sr. Petitions Att</u>		
SIGNATURE: <u>Nancy Johnson</u>		PHONE: <u>703-305-0390</u>		
OFFICE: <u>Petitions</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>Officer Kelly</u>		DATE: <u>7/12/04</u>		

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**